

04/16/01  
JC962 U.S. PTO

74-17-01

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PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 163-321

First Inventor or Application Identifier Danilo Cattaneo

Title System for economic ... planning

Express Mail Label No. EL740689517US

835886  
04/16/01

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 25] (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- Descriptive title of the Invention	
- Cross References to Related Applications	
- Statement Regarding Fed sponsored R & D	
- Reference to Microfiche Appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 10]	7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. Oath or Declaration [Total Pages 2]	8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	9. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
13. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired	
14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
15. <input type="checkbox"/> Other: _____	

\*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No: \_\_\_\_\_

Prior application information Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)					or <input checked="" type="checkbox"/> Correspondence address below
Name	James V. Costigan, Esq.					
HEDMAN, GIBSON & COSTIGAN, P.C.						
Address	1185 Avenue of the Americas					
Suite 2003						
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Name (Print/Type)	James V. Costigan, Esq.	Registration No (Attorney/Agent)	25,669
Signature			Date 4/16/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 CFR §§ 1.27 and 1.28

TOTAL AMOUNT OF PAYMENT (\$ 395.00)

## Complete if Known

Application Number	Not Yet Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Danilo CATTANEO
Examiner Name	--
Group / Art Unit	--
Attorney Docket No	163-321

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 08-1540

Deposit Account Name Hedman &amp; Costigan P.C.

 Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2.  Payment Enclosed:

 Check  Money Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

## Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	690	201 345 Utility filing fee	355
106	310	206 155 Design filing fee	
107	480	207 240 Plant filing fee	
108	690	208 345 Reissue filing fee	
114	150	214 75 Provisional filing fee	

SUBTOTAL (1) (\$ 355)

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
1.0	20**	= 0	X 9 = 0 -
Independent Claims	1 - 3**	= 0	X 40 = 0 -
Multiple Dependent			= 0 -

\*\* or number previously paid if greater. For Reissues, see below

## Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	78	202 39 Independent claims in excess of 3
104	260	204 130 Multiple dependent claim, if not paid
109	78	209 39 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0 -)

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65	Surcharge - late filing fee or oath	
127	50	227 25	Surcharge - late provisional filing fee or cover sheet	
139	130	139 130	Non-English specification	
147	2,520	147 2,520	For filing a request for reexamination	
112	920*	112 920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115	110	215 55	Extension for reply within first month	
116	380	216 190	Extension for reply within second month	
117	870	217 435	Extension for reply within third month	
118	1,360	218 680	Extension for reply within fourth month	
128	1,850	228 925	Extension for reply within fifth month	
119	300	219 150	Notice of Appeal	
120	300	220 150	Filing a brief in support of an appeal	
121	260	221 130	Request for oral hearing	
138	1,510	138 1,510	Petition to institute a public use proceeding	
140	110	240 55	Petition to revive - unavoidable	
141	1,210	241 605	Petition to revive - unintentional	
142	1,210	242 605	Utility issue fee (or reissue)	
143	430	243 215	Design issue fee	
144	580	244 290	Plant issue fee	
122	130	122 130	Petitions to the Commissioner	
123	50	123 50	Petitions related to provisional applications	
126	240	126 240	Submission of Information Disclosure Stmt	
581	40	581 40	Recording each patent assignment per property (times number of properties)	40.00
146	690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify)

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

Complete if applicable

Name (Print/Type)	James V. Costigan	Registration No. (Attorney/Agent)	25,669	Telephone	212-302-8989
Signature				Date	4/16/01

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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